

Utah National Guard
Family Readiness Volunteer Info Sheet and Agreement

Privacy Act Statement

AUTHORITY: Section 301, Title 5 USC, and Sections 3012 and 8012, Title 10 USC

PRINCIPAL PURPOSE(S): The purpose for soliciting this information is to obtain personal information on members of the Utah National Guard and their families so as to provide assistance to all members and their families in programs that affect family life, including assistance during emergency situations, Federal or State.

ROUTINE USE(S): Any information you provide can be disclosed to elements of the Department of Defense and the Utah National Guard who have the need for the information in the performance of their duties, as well as to civilian members and volunteers of Family Readiness Groups.

DISCLOSURE MANDATORY OR VOLUNTARY: THE EFFECT OF NOT PROVIDING INFORMATION. Providing the information is purely voluntary.

Unit:	Date you became a volunteer:	
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Name:	<hr/>	
<hr/>		
Address:	<hr/>	
City:	State:	Zip:
<hr/>		
Phone Number:	Alt Number:	
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E-mail:	Birthday:	
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Spouse's Name:	Rank:	
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The following information will be used to put you on orders and reimburse you for related expenses incurred as a Family Readiness Volunteer (i.e., travel expenses, phone calls, childcare, etc).	Social Security Number:
	Bank/Credit Union Name:
	Routing Number (9 digits):
	Account Number:
	Checking or Savings:

Volunteer Agreement

I desire to volunteer my services to the Utah National Guard Family Readiness Program at

(Unit, Address, City, State)

I expressly agree that my services are being performed as a volunteer and that I am not, solely because these services, an employee of the United States Government or any instrumentality thereof except for certain purposes relating to tort claims and workman's compensation coverage with regard to incidents occurring during the performance of approved volunteer services. I expressly agree that I expect no present or future salary, wages, or related benefits as payment for these volunteer services. I agree to participate in whatever training that may be required in order for me to perform the work for which I am volunteering.

Volunteer Signature	Date
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Accepting Official Signature	Date
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Typed/Printed Name of Accepting Official: MAJ Patrick Osmond